BIRCH, STEWART, KOLASCH & BIRCH, LLP

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ATTORNEY DOCKET NO. 0641-0261PUS1

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING: AUG O G ZOOL

COMMINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

•	As a below named inventor, I hereby declare verily believe that I am the original, first and (if plural inventors are named below) of the s	sole inventor (if only one in	nventor is named below) or an original	ginal, first and joint inventor			
Insert Title:	PUMP CONTROL SYSTEM						
Fill in Appropriate Information - For Use Without Specification Attached:	the specifications of which is attached hereto. If and/or the following: the specification was filed on United States Application Number and amended on the specification was filed on International Application Number amended on		ation is identified by the attorney doo	as ; oplicable); and/or as PCT ; and was			
	I hereby state that I have reviewed and unby any amendment referred to above. I acknowledge the duty to disclose inform \$1.56. I do not know and do not believe the sathereof, or patented or described in any print prior to this application, that the same was no application, that the invention has not been application in any country foreign to the Unit more than twelve months (six months for deson this invention has been filed in any countrepresentatives or assigns, except as follows. I hereby claim foreign priority benefits or inventor's certificate listed below and have	mation which is material to pa ume was ever known or used ed publication in any country of in public use or on sale in patented or made the subject ted States of America on an a signs) prior to this application try foreign to the United States under Title 35, United States also identified below any	atentability as defined in Title 37, (I in the United States of America ry before my or our invention the the United States of America more to fan inventor's certificate iss application filed by me or my legal on, and that no application for parates of America prior to this apposes Code, \$119 (a)-(d) of any force	code of Federal Regulations, before my or our invention before my or our invention ereof or more than one year than one year prior to this used before the date of this al representatives or assigns tent or inventor's certificate lication by me or my legal			
Insert Priority Information: (if appropriate)	Prior Foreign Application(s)	which priority is claimed:		Priority Claimed			
	PR 8068 A	(Country)	3 October 2001 (Month / Day / Year Filed)				
				Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, Unite	ed States Code, §119(e) of an	y United States provisional applica				
	(Application Number)	· · · · · · · · · · · · · · · · · · ·	-	(Filing Date)			
-	(Application Number)			(Filing Date)			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:						
Insert Requested Information: (if appropriate)	Country	Applicat	tion Number Date of	Date of Filing (Month / Day / Year)			
Insert Prior U.S.	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in- part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
Application(s):	(Application Number)	(Filing Daie) (Status - pa		atented, pending, abandoned)			
Page 1 of 2	(Application Number)	(Filing Date)	(Status - natented	pending, abandoned)			

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

YOU MUST COMPLETE THE FOLLOWING:)	•		
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	/	DATE*		
Insert Name of Inventor Insert Date This Document is Signed	WALTER HENRY	BERRYMAN	Walkeyen	k-,	22 June 2004		
Insert Residence	Residence (City, State	• • • • • • • • • • • • • • • • • • • •		CITIZENSHIP	:		
Insert Citizenship	Croydon, Victoria, Australia		Australian				
Insert Mailing Address	MAILING ADDRESS (Complete Street Address including City, State & Country) 34 Richardson Road, Croydon, Victoria, 3136, Australia						
Full Name of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	,/	DATE*		
invarior, it ally.	HUGH BARR	McDONALD	Auf Mill	U			
see above	Residence (City, State			CITIZENSHIP			
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Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	•						
see above	Residence (City, State 8	ß Country)		CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fourth	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATES		
Inventor, if any			INVENTORS SIGNATURE		DATE*		
· see above	Residence (City, State &	Country)	<u>_l </u>	CITIZENSHIP			
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	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth	00/51/11/15						
Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	0 11 101 0						
33.207	Residence (City, State & Country) CITIZENSHIP						
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Page 2 of 2 (Revised 01/02)		•					
(NEVISCU UI/UZ)	* DATE OF SIGNATURE						